

## **IC 12-15-2**

### **Chapter 2. Eligibility**

#### **IC 12-15-2-0.5**

##### **Provisions not limiting health care assistance**

Sec. 0.5. (a) This section applies to a person who qualifies for assistance:

- (1) under sections 13 through 16 of this chapter;
- (2) under section 6 of this chapter when the person becomes ineligible for medical assistance under IC 12-14-2-5.1 or IC 12-14-2-5.3; or
- (2) as a disabled person if the person is less than eighteen (18) years of age and otherwise qualifies for assistance.

(b) Notwithstanding any other law, the following may not be construed to limit health care assistance to a person described in subsection (a):

- (1) IC 12-8-1-13.
- (2) IC 12-14-1-1.
- (3) IC 12-14-1-1.5.
- (4) IC 12-14-2-5.1.
- (5) IC 12-14-2-5.2.
- (6) IC 12-14-2-5.3.
- (7) IC 12-14-2-17.
- (8) IC 12-14-2-18.
- (9) IC 12-14-2-20.
- (10) IC 12-14-2-21.
- (11) IC 12-14-2-22.
- (12) IC 12-14-2-24.
- (13) IC 12-14-2-25.
- (14) IC 12-14-2-26.
- (15) IC 12-14-2-5.
- (16) IC 12-14-5.5.
- (17) Section 21 of this chapter.
- (18) IC 12-15-5-3.

*As added by P.L.46-1995, SEC.31.*

#### **IC 12-15-2-1**

##### **"Federal income poverty level" defined**

Sec. 1. As used in this chapter, "federal income poverty level" means the nonfarm income official poverty line as determined annually by the federal Office of Management and Budget.

*As added by P.L.2-1992, SEC.9.*

#### **IC 12-15-2-2**

##### **Determination and certification of eligibility and effective date of assistance**

Sec. 2. The county office shall determine eligibility and shall certify to the office at the time and in the manner required by the office a list of individuals who have been found eligible to receive Medicaid and the effective date for the payment of assistance under

this chapter. The date must be one (1) month before the first day of the month in which the application or request is made.

*As added by P.L.2-1992, SEC.9. Amended by P.L.4-1993, SEC.110; P.L.5-1993, SEC.123.*

### **IC 12-15-2-3**

**Individuals eligible; receipt of monthly assistance payments or medical services; eligibility for medical services under aid to dependent children assistance category or under state supplemental assistance program for aged, blind, or disabled**

Sec. 3. An individual who:

- (1) is receiving monthly assistance payments or medical services; or
- (2) would be eligible to receive medical services under the aid to dependent children assistance category or under the state supplemental assistance program for the aged, blind, or disabled;

is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9.*

### **IC 12-15-2-4**

**Individuals eligible; eligible under another approved state plan but for plan condition or requirement prohibited in Medicaid program under Social Security Act**

Sec. 4. An individual who would be eligible for aid or assistance under one (1) of the other approved state plans except for an eligibility condition or other requirement in the plan that is specifically prohibited in a Medicaid program under Title XIX of the federal Social Security Act (42 U.S.C. 1396 et seq.) is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9.*

### **IC 12-15-2-5**

**Individuals eligible; recipients of old age assistance, blind assistance, or disabled assistance payments as of December 31, 1973**

Sec. 5. An individual who:

- (1) was receiving assistance payments in the old age assistance, blind assistance, or disabled assistance categories as of December 31, 1973; and
- (2) continues to remain eligible under state laws and rules;

is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9.*

### **IC 12-15-2-6**

**Individuals eligible; Supplemental Security Income assistance and Social Security Disability Insurance recipients**

Sec. 6. (a) Subject to subsection (b), an individual who:

- (1) is receiving monthly assistance payments under the federal Supplemental Security Income program; and

(2) meets the income and resource requirements established by statute or the office unless the state is required to provide medical assistance to the individual under 42 U.S.C. 1396a(f) or under 42 U.S.C. 1382h;  
is eligible to receive Medicaid.

(b) An individual who is receiving monthly disability assistance payments under the federal Supplemental Security Income program or the federal Social Security Disability Insurance program must meet the eligibility requirements specified in IC 12-14-15 unless the state is required to provide medical assistance to the individual under 42 U.S.C. 1382h.

(c) The office may not apply a spend down requirement to an individual who is eligible for medical assistance under 42 U.S.C. 1382h.

*As added by P.L.2-1992, SEC.9. Amended by P.L.287-2001, SEC.5; P.L.218-2003, SEC.2.*

#### **IC 12-15-2-6.5**

##### **Medicaid buy-in program**

Sec. 6.5. Notwithstanding section 6 of this chapter, beginning July 1, 2002, an individual who meets the requirements of IC 12-15-41 is eligible for Medicaid.

*As added by P.L.287-2001, SEC.6.*

#### **IC 12-15-2-7**

##### **Individuals eligible; children in families receiving AFDC assistance**

Sec. 7. A child in a family who receives AFDC assistance and is less than twenty-one (21) years of age but not otherwise eligible to be included in section 2 or 3 of this chapter is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9.*

#### **IC 12-15-2-8**

##### **Individuals eligible; patients in medical institutions or institutions for mentally retarded**

Sec. 8. An individual who:

- (1) has been found eligible for Medicaid under section 2, 3, 4, 5, or 6 of this chapter; and
- (2) is a patient in an institution for the mentally retarded or who is a patient in a medical institution, as long as the institution or that part of the institution in which the patient resides qualifies as an intermediate care facility for mental retardation under Title XIX of the federal Social Security Act (42 U.S.C. 1396 et seq.);

is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9.*

#### **IC 12-15-2-9**

##### **Individuals eligible; patients in institutions for mentally diseased; definition**

Sec. 9. (a) As used in this section, "institution for the mentally diseased" includes a facility that meets the requirements and regulations under 42 U.S.C. 1396 et seq.

(b) Except as provided in subsections (c) and (d), an individual who:

(1) is less than twenty-one (21) years of age or at least sixty-five (65) years of age who has been found to be eligible for Medicaid under section 2, 3, 4, 5, or 6 of this chapter; and

(2) is a patient in an institution for the mentally diseased; is eligible to receive Medicaid.

(c) Psychiatric services may extend until twenty-two (22) years of age or until treatment has ended, whichever occurs first.

(d) Intermediate care facility services may be provided in a mental health institution.

*As added by P.L.2-1992, SEC.9.*

#### **IC 12-15-2-10**

##### **Individuals eligible; long term care program participants**

Sec. 10. An individual who:

(1) is at least sixty-five (65) years of age;

(2) participates in the Indiana long term care program under IC 12-15-39.6; and

(3) satisfies the requirements under IC 12-15-39.6-8;

is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9. Amended by P.L.24-1997, SEC.45.*

#### **IC 12-15-2-11**

##### **Individuals eligible; qualified pregnant women**

Sec. 11. A qualified pregnant woman (as defined in 42 U.S.C. 1396d(n)(1)) is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9.*

#### **IC 12-15-2-12**

##### **Individuals eligible; qualified children**

Sec. 12. A qualified child (as defined in 42 U.S.C. 1396d(n)(2)) is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9.*

#### **IC 12-15-2-13**

##### **Individuals eligible; pregnant women with limited family incomes; income limitations; covered services; duration of assistance**

Sec. 13. (a) A pregnant woman:

(1) who is not described in 42 U.S.C. 1396a(a)(10)(A)(i); and

(2) whose family income does not exceed the income level established in subsection (b);

is eligible to receive Medicaid.

(b) A pregnant woman described in this section is eligible to receive Medicaid, subject to subsections (c) and (d) and 42 U.S.C. 1396a et seq., if her family income does not exceed one hundred fifty percent (150%) of the federal income poverty level for the same size

family.

(c) Medicaid made available to a pregnant woman described in this section is limited to medical assistance for services related to pregnancy, including prenatal, delivery, and postpartum services, and to other conditions that may complicate pregnancy.

(d) Medicaid is available to a pregnant woman described in this section for the duration of the pregnancy and for the sixty (60) day postpartum period that begins on the last day of the pregnancy, without regard to any change in income of the family of which she is a member during that time.

(e) The office may apply a resource standard in determining the eligibility of a pregnant woman described in this section.

*As added by P.L.2-1992, SEC.9. Amended by P.L.46-1995, SEC.32; P.L.119-1997, SEC.1.*

### **IC 12-15-2-13.5**

#### **Women over 65 years of age**

Sec. 13.5. (a) A woman:

- (1) who is not eligible for Medicaid under any other section of this chapter;
- (2) who is less than sixty-five (65) years of age;
- (3) who has been:
  - (A) screened for breast or cervical cancer through the breast and cervical cancer screening program under the federal Breast and Cervical Cancer Mortality Prevention Act of 1990 (42 U.S.C. 300k); and
  - (B) determined to need treatment for breast or cervical cancer;
- (4) who is not otherwise covered under credible coverage (as defined in 42 U.S.C. 300gg(c)); and
- (5) whose family income does not exceed two hundred percent (200%) of the federal income poverty level for the same size family;

is eligible for Medicaid.

(b) Medicaid made available to a woman described in subsection (a) is limited to the duration of treatment required for breast or cervical cancer.

*As added by P.L.152-2001, SEC.2.*

### **IC 12-15-2-14**

#### **Minors with limited family income**

Sec. 14. (a) An individual:

- (1) who is less than nineteen (19) years of age;
- (2) who is not described in 42 U.S.C. 1396a(a)(10)(A)(I); and
- (3) whose family income does not exceed the income level established in subsection (b);

is eligible to receive Medicaid.

(b) An individual described in this section is eligible to receive Medicaid, subject to 42 U.S.C. 1396a et seq., if the individual's family income does not exceed one hundred fifty percent (150%) of

the federal income poverty level for the same size family.

(c) The office may apply a resource standard in determining the eligibility of an individual described in this section.

*As added by P.L.2-1992, SEC.9. Amended by P.L.46-1995, SEC.33; P.L.119-1997, SEC.2; P.L.273-1999, SEC.171.*

#### **IC 12-15-2-15 Repealed**

*(Repealed by P.L.273-1999, SEC.182.)*

#### **IC 12-15-2-15.5**

##### **Repealed**

*(Repealed by P.L.273-1999, SEC.182.)*

#### **IC 12-15-2-15.6**

##### **Repealed**

*(Repealed by P.L.1-2001, SEC.51.)*

#### **IC 12-15-2-15.7**

##### **Repealed**

*(Repealed by P.L.107-2002, SEC.32.)*

#### **IC 12-15-2-16**

##### **Eligibility of individuals under 18 years of age**

Sec. 16. An individual:

- (1) who is less than eighteen (18) years of age;
- (2) who is described in 42 U.S.C. 1396a(a)(10)(A)(ii); and
- (3) who is:
  - (A) a child in need of services (as defined in IC 31-34-1);
  - (B) a child placed in the custody of the division of family and children or a county office under IC 31-35-6-1 (or IC 31-6-5-5 before its repeal); or
  - (C) a child placed under the supervision or in the custody of the division of family and children or a county office by an order of the court;

is eligible to receive Medicaid.

*As added by P.L.2-1992, SEC.9. Amended by P.L.4-1993, SEC.111; P.L.5-1993, SEC.124; P.L.1-1997, SEC.60.*

#### **IC 12-15-2-17**

##### **Exclusion of resources in determining eligibility for Medicaid; conditions**

Sec. 17. (a) Except as provided in subsections (b) and (d), if an applicant for or a recipient of Medicaid:

- (1) establishes one (1) irrevocable trust that has a value of not more than ten thousand dollars (\$10,000), exclusive of interest, and is established for the sole purpose of providing money for the burial of the applicant or recipient;
- (2) enters into an irrevocable prepaid funeral agreement having a value of not more than ten thousand dollars (\$10,000); or
- (3) owns a life insurance policy with a face value of not more

than ten thousand dollars (\$10,000) and with respect to which provision is made to pay not more than ten thousand dollars (\$10,000) toward the applicant's or recipient's funeral expenses; the value of the trust, prepaid funeral agreement, or life insurance policy may not be considered as a resource in determining the applicant's or recipient's eligibility for Medicaid.

(b) Subject to subsection (d), if an applicant for or a recipient of Medicaid establishes an irrevocable trust or escrow under IC 30-2-13, the entire value of the trust or escrow may not be considered as a resource in determining the applicant's or recipient's eligibility for Medicaid.

(c) If an applicant for or a recipient of Medicaid owns resources described in subsection (a) and the total value of those resources is more than ten thousand dollars (\$10,000), the value of those resources that is more than ten thousand dollars (\$10,000) may be considered as a resource in determining the applicant's or recipient's eligibility for Medicaid.

(d) In order for a trust, an escrow, a life insurance policy, or a prepaid funeral agreement to be exempt as a resource in determining an applicant's or a recipient's eligibility for Medicaid under this section, the applicant or recipient must designate the office or the applicant's or recipient's estate to receive any remaining amounts after delivery of all services and merchandise under the contract as reimbursement for Medicaid assistance provided to the applicant or recipient after fifty-five (55) years of age. The office may receive funds under this subsection only to the extent permitted by 42 U.S.C. 1396p. The computation of remaining amounts shall be made as of the date of delivery of services and merchandise under the contract and must be the excess, if any, derived from:

- (1) growth in principal;
- (2) accumulation and reinvestment of dividends;
- (3) accumulation and reinvestment of interest; and
- (4) accumulation and reinvestment of distributions;

on the applicant's or recipient's trust, escrow, life insurance policy, or prepaid funeral agreement over and above the seller's current retail price of all services, merchandise, and cash advance items set forth in the applicant's or recipient's contract.

*As added by P.L.2-1992, SEC.9. Amended by P.L.113-1996, SEC.1; P.L.272-1999, SEC.39; P.L.178-2002, SEC.80.*

## **IC 12-15-2-18**

### **Financial resources; state or federal higher education awards**

Sec. 18. Except as provided by federal law, if an individual receives a state or federal higher education award that is paid directly to an approved institution of higher learning (as defined in IC 20-12-21-3) for the individual's benefit:

- (1) the individual is not required to report that award as income or as a resource of the individual when applying for Medicaid; and
- (2) the award may not be considered as income or a resource of

the individual in determining initial or continuing eligibility for Medicaid.

*As added by P.L.2-1992, SEC.9.*

#### **IC 12-15-2-19**

##### **Acquisition of property, income, or resources; notification of county office; alteration or cancellation of assistance; recovery of excess assistance**

Sec. 19. (a) If, while receiving Medicaid, a recipient becomes the owner of any:

- (1) property;
- (2) income; or
- (3) resources;

in excess of the amount owned when the recipient's eligibility was determined, the recipient shall immediately notify the county office of the receipt of possession of the property or income.

(b) After an investigation of circumstances under subsection (a), the county office shall recommend to the office the cancellation or alteration of the amount of Medicaid in accordance with the circumstances.

(c) Assistance paid after the recipient acquires possession of:

- (1) property;
- (2) income; or
- (3) resources;

in excess of the recipient's needs is recoverable by the office from the recipient or the estate of the recipient.

(d) However, an eligible individual is not required to notify the division or county office of a Holocaust victim's settlement payment received by the individual. A county office may not cancel or alter the amount of Medicaid received by the individual after the individual's receipt of the payment. Assistance paid after the individual's receipt of the payment is not recoverable by the office from the individual or the estate of the individual.

*As added by P.L.2-1992, SEC.9. Amended by P.L.4-1993, SEC.112; P.L.5-1993, SEC.125; P.L.128-1999, SEC.20.*

#### **IC 12-15-2-20**

##### **Ineligibility after conviction**

Sec. 20. (a) This section does not apply to a provider (as defined in IC 12-7-2-149.1(2)).

(b) A person convicted of an offense under IC 35-43-5-7.1 is ineligible to receive Medicaid assistance under this article for ten (10) years after the conviction.

*As added by P.L.46-1995, SEC.36. Amended by P.L.241-2003, SEC.3.*

#### **IC 12-15-2-21**

##### **Ineligibility due to noncompliance**

Sec. 21. Notwithstanding any other provision of this article, a person who is ineligible for assistance under IC 12-14-2 because of



noncompliance with IC 12-14-2-21, IC 12-14-2-24, IC 12-14-2-26, or IC 12-14-5.5 is ineligible for Medicaid under this article.

*As added by P.L.46-1995, SEC.37.*

#### **IC 12-15-2-22**

##### **Determination of eligibility; certain equity value in motor vehicle may not be considered**

Sec. 22. When the office applies a resource standard to determine an applicant's or a recipient's eligibility for Medicaid under this chapter, the office may not consider five thousand dollars (\$5,000) of equity value (as defined in 470 IAC 10.1-3-1) in one (1) motor vehicle belonging to:

- (1) the applicant or recipient; or
- (2) a member of the applicant's or recipient's family.

*As added by P.L.126-1998, SEC.2.*